US Department of Labor Office of Labor Management Standards Washington DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No 1215-0188
Expires 11 30-2006

This report is mandatory under P L 86-257 as amended Failure to comply may result in criminal prosecution fines, or civil penalties as provided by 29 U S C 439 or 440



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

1 File Number U 3074	2 Fiscal Year Covered From
, , , , , , , , , , , , , , , , , , ,	7 / / 2004 Through 12 / 31 / 2004
3 Name and address of person filing	4 Name file number and address of labor organization
Name Jeffrey 0 Wilkinson	Name Laborers Local #663
	Labor Organization File Number 042-741
PO Box Bidg Room No If any	PO Box Building and Room Number if any
Street 2520 Sw 10th Strat	Street 7820 Prospect
City Lee's Summ +	City Kansas City
State M_ \$500F1 ZIP Code +4 640 8	State Missouri ZIP Code + 4 64132
5 Position in labor organization President and Business Manager	
A Held an interest in engaged in transactions (including loans) with or monetary value from an employer whose employees your organization of Name and address of Employer (including trade name if any)	7 a Nature of Interest Transaction or Income
Name MISSOUR LECET	Meal provided during discussion of LECET while attending Tri-Fund Conference
PO Box Bldg Room No if any	76 Amount
Street 1101 E 87th Street	
City Kansas Cty	33 87
State Misson, ZIP Code + 4 64/3/	
Signature	
15. Signature and verification. The undersigned declares under penalty of Perjury and other applicable penalties of the law that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is to the best of the undersigned's knowledge and belief true correct, and complete (See the section on penalties in the instructions.)	
Signed MOhill on 18/12/05 816-444-0062	

Telephone Number